

PROGRAM REGISTRATION FORM

Name _____ Home Phone _____
 (parent/guardian if participant is under 18 or under legal guardianship)
 Street Address _____ Work Phone _____
 City _____ State _____ Zip _____ Emergency Contact _____
 City of Bloomington Resident? Yes No E-mail Address _____
 (If you are unsure of your residency status, please call 349-3700)

How did you hear of this program? Program Guide Newspaper Flyer Friend E-mail Web site Previous Participant Other _____

Participant Name	Gender	Birthdate	Shirt Size	Program Name	Class Code	Fee

Inclusive Service Request:

Reasonable accommodations are needed to participate in above program(s) related to specific needs associated with a disability. (circle one) YES NO
 If YES, please complete an Inclusion Assessment and the Inclusive Recreation Coordinator will contact you. We request at least two weeks notification for reasonable accommodations requests. In some cases reasonable accommodations may take longer.

The undersigned is the adult Program Participant, or is the parent or legal guardian of the Program Participant. The undersigned hereby states that s/he understands the activities that will take place in this program, and that the Program Participant is physically and mentally able to participate in this program. The undersigned recognizes, as with any activity, there is risk of injury. In the event that the Program Participant sustains an injury in the course of the program, and the City of Bloomington Parks and Recreation Department is unable to contact the appropriate person(s) to obtain consent for treatment, the City of Bloomington Parks and Recreation Department and/or its employees or volunteers are authorized to take reasonable steps to obtain appropriate medical treatment. The Program Participant and/or his/her parent or legal guardian shall be responsible for the cost of such treatment. The Undersigned now releases the City of Bloomington, the Bloomington Parks and Recreation Department, its employees, agents, and assigns, from any claims including, but not limited to, personal injuries or damage to property caused by or having any relation to this activity. It is understood that this release applies to any present or future injuries and that it binds the Undersigned, Undersigned's spouse, heirs, executors and administrators. The Program Participant may be photographed and videotaped while participating in Parks and Recreation activities, and consent is given for the reproduction of such photos or videos for advertising and publicity. I have read this release and understand all of its terms. I agree with its terms and sign it voluntarily.

Signature (parent/guardian if participant is under 18 or under legal guardianship) _____

Date _____

Include Your Voluntary Donation to the Bloomington Parks Foundation
☐ Youth Scholarship Fund \$1 _____
☐ Bloomington Tree Fund \$3 _____
☐ Greatest need \$5 _____
 Other \$ _____

Total Enclosed \$ _____

Method of Payment:

☐ Cash (do not mail cash) ☐ Check/Money Order

Visa/Mastercard # _____

Expiration Date _____

Signature _____

(required if using credit card)

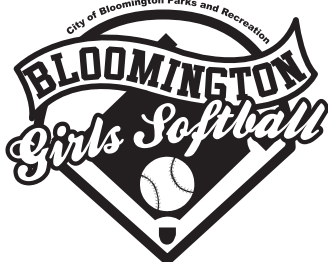
Make check or money order payable to:
 City of Bloomington Parks and Recreation

Mail registrations to:
 City of Bloomington Parks and Recreation
 401 N. Morton Street, Ste. 250, Bloomington IN 47404



Is your child age 4-6 yrs.?

The Intro League is sure to make your and your child's experiences memorable ones. Intro League play involves the use of a cloth-filled leather ball, tees, and coach pitch. A great first-time youth sports experience.



Middle School Softball League

Players may choose to play on a team with girls from the same middle school. Teams play a 10-game season followed by a post-season tournament. League is open to players who are currently in middle school or who will enter middle school in the 2012-2013 school year. List your school under "Program Name" on the registration form.

**\$80/in-city and \$90 non-city
 Register by 3/23.**



All teams play a 10-game season followed by a post-season tournament!

Our staff of qualified administrators and certified coaches/volunteers are committed to providing the best possible instruction and experience for you and your child. If you have any pre-season questions (what size equipment to purchase, etc.) or want further information about the program, call Tim Fulton at 349-3742.

Yeah, we play like girls. You got a problem with that?



**2012 Bloomington
Parks and Recreation
Girls Softball league runs
April 7–June 24.
Register by 3/23.**



**CITY OF BLOOMINGTON
parks and recreation
401 N. Morton St. Ste. 250
Bloomington IN 47404**

**For more information, contact Tim Fulton
at 349-3742 or fultont@bloomington.in.gov.**

bloomington.in.gov/softball

Designed for the beginning through advanced player, this league focuses on responsible competition, including skill building and a complete understanding of the game. Several levels of play are offered, ranging from tee ball to fastpitch, for players ages 4–15 yrs. Each player receives a full competition-quality uniform. This league is instructed and overseen by certified youth sports professionals, ensuring a quality experience for all players and parents. Players can play up, or in more than one league, with the approval of league commissioner. Please note special requests for team placements (e.g. on the same team as friends) on the registration form. We make every attempt to accommodate special requests.

Games are played on weekdays. Practices are conducted on the weekends, April 7–June 24. League concludes with a post-season tournament. Participants play one to two games a week with one practice per week. There is a season-ending awards ceremony June 25.

Middle School Softball League—Please denote which middle school the player will attend in Fall 2012 on the registration form.

Coaches wanted! For more information about leagues or volunteering to coach contact Tim Fulton at 349-3742.

**\$80/in-city,
\$90/non-city
Days, dates,
times, and
locations TBD**

**In the event of
rain, call the
Sports Hotline
at 349-3610
for further
instructions.** If it
rains, your team
placement day still
takes place. The
Sports Hotline will
inform you of the
indoor location for
team placement.

My daughter was born in:	Her league is:	Registration code is:	Registration deadline:	Her team placement day at Lower Cascades ballfields Wear comfortable clothes, cleats, and bring your gear.	Duration of league:
2005, 2006, or 2007	Intro League Coach Pitch/Tee ball	17201-A	3/23	Sun., April 1, 1–2 p.m.	4/1–6/25
2003 or 2004	Mid-Minor League Machine Pitch	17201-B	3/23	Sun., April 1, 2–3:30 p.m.	4/1–6/25
2001 or 2002	Minor League Player Pitch	17201-C	3/23	Sun., April 1, 3:30–5 p.m.	4/1–6/25
1999 or 2000	Mid-Major League Player Pitch	17201-D	3/23	Sun., April 1, 5–6:30 p.m.	4/1–6/25
1996, 1997 or 1998	Major League Player Pitch	17201-E	3/23	Sun., April 1, 5–6:30 p.m.	4/1–6/25
In middle school in 2011 or 2012	Middle School League Player Pitch	17201-F	3/23	You will be contacted by your coach.	4/1–6/25